



SAN DIEGO COUNTY INFLUENZA SURVEILLANCE

2020-21 SEASON

AS OF WEEK 44 (ENDING 10/31/2020)



CURRENT UPDATE

Reported Since July 1, 2020



LIVE WELL
SAN DIEGO

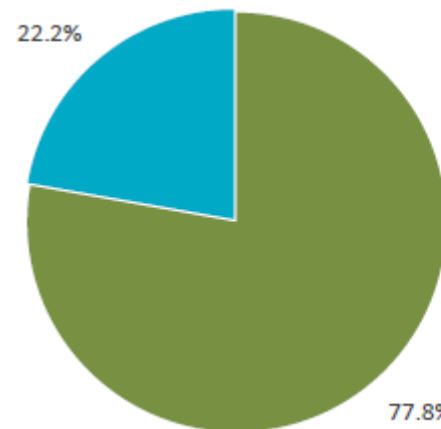
TOTAL REPORTED INFLUENZA CASES

N=18

0 Flu Deaths

0 Pediatric Deaths

0 Outbreaks



Virus Characteristics

- Influenza A, subtype unknown
- Influenza A (H1N1)pdm09
- Influenza A (H3)
- Influenza B, subtype unknown
- Influenza B/Victoria
- Influenza B/Yamagata
- Influenza, type unknown

11/4/2020

Preliminary Results

Data Source: San Diego County Communicable Disease Registry

Prepared by County of San Diego, Health & Human Services Agency, Public Health Services, Epidemiology and Immunization Services Branch

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Table 1. Influenza Surveillance Indicators.

Indicator	2020-21 Season			2019-20 Season			Prior 3-Year Average*		
	Week 44	Week 43	Total to Date	Week 44	Total To Date	Season Total	Week 44	Total To Date	Season Total
All influenza detections reported (rapid or PCR)	5	2	18	52	400	20,711	48	313	17,073
Percent of emergency department visits for ILI	2%	2%		3%			3%		
Percent of deaths registered with pneumonia and/or influenza	6%	6%		6%			6%		
Number of influenza-related outbreaks [∞]	0	0	0	0	1	25	0	1	69
Number of influenza-related deaths reported [^]	0	0	0	1	3	108	1	2	176

Influenza season is July 1 – June 30, Weeks 27-26. Previous weeks case counts or percentages may change due to delayed processing or reporting.

*Includes FYs 2017-18, 2018-19, and 2019-20.

[∞]At least one case of laboratory-confirmed influenza in a setting experiencing two or more cases of influenza like illness (ILI) within a 72-hour period.

Total confirmed influenza outbreaks in prior seasons: 119 in 2017-18, 25 in 2018-19, and 62 in 2019-20.

[^]Current FY deaths are shown by week of report; by week of death for prior FYs. Total deaths reported in prior seasons: 343 in 2017-18, 77 in 2018-19, and 108 in 2019-20.

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Table 2. Influenza Cases Reported, 2020-2021 Season*

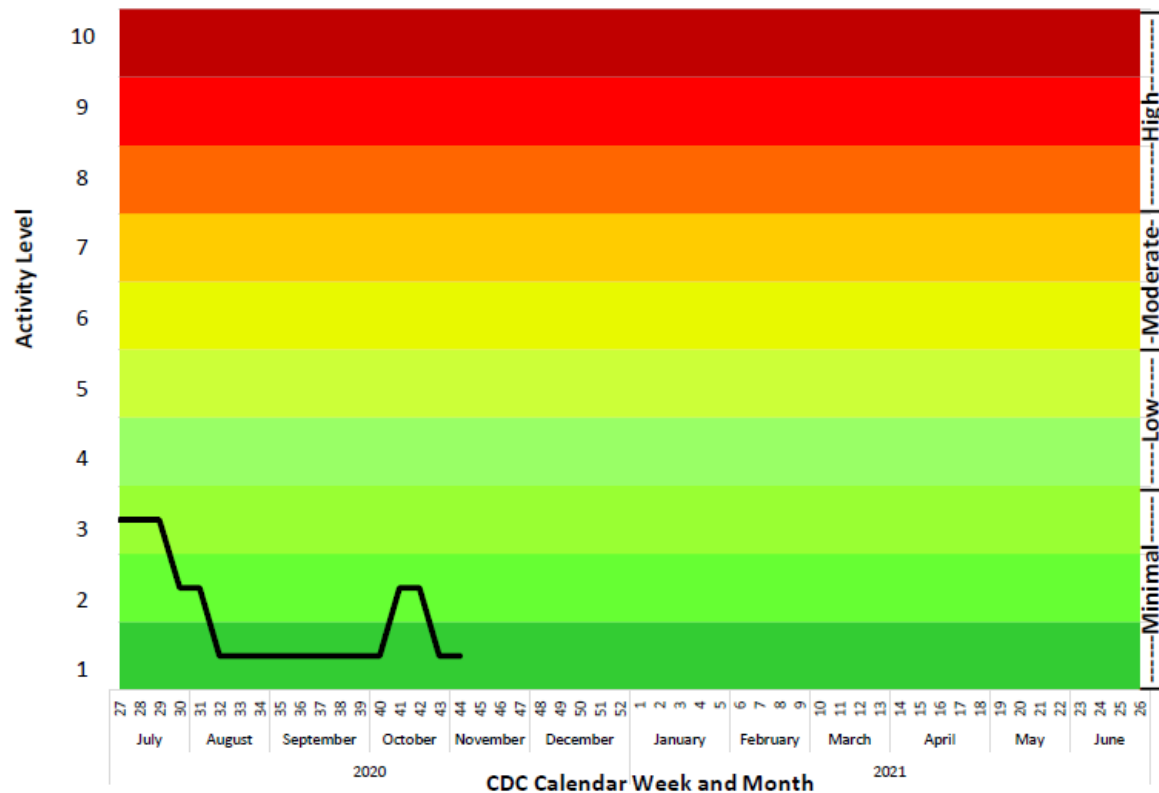
Positive Test Type/Subtype	Week 44	Week 43	Total to Date	Percent to Date
Influenza A, subtype unknown	4	2	14	77.8%
Influenza A (H1N1)pdm09	0	0	0	0.0%
Influenza A (H3)	0	0	0	0.0%
Influenza B, subtype unknown	1	0	4	22.2%
Influenza B/Victoria	0	0	0	0.0%
Influenza B/Yamagata	0	0	0	0.0%
Influenza, type unknown	0	0	0	0.0%
Total	5	2	18	100.0%

**Season is July 1- June 30, Weeks 27-26.*

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**Figure 1. Activity Level of Emergency Department Influenza-Like Illness (ILI),
2020-21 Season to Date.**



Legend

Minimal			Low		Moderate		High		
LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	LEVEL 5	LEVEL 6	LEVEL 7	LEVEL 8	LEVEL 9	LEVEL 10
≥ mean and <1 standard deviation above mean	≥1 and <2 standard deviations above mean	≥2 and <3 standard deviations above mean	≥3 and <4 standard deviations above mean	≥4 and <5 standard deviations above mean	≥5 and <6 standard deviations above mean	≥6 and <7 standard deviations above mean	≥7 and <8 standard deviations above mean	≥8 standard deviations above mean	≥9 standard deviations above mean
< mean									

11/4/2020

Preliminary Results

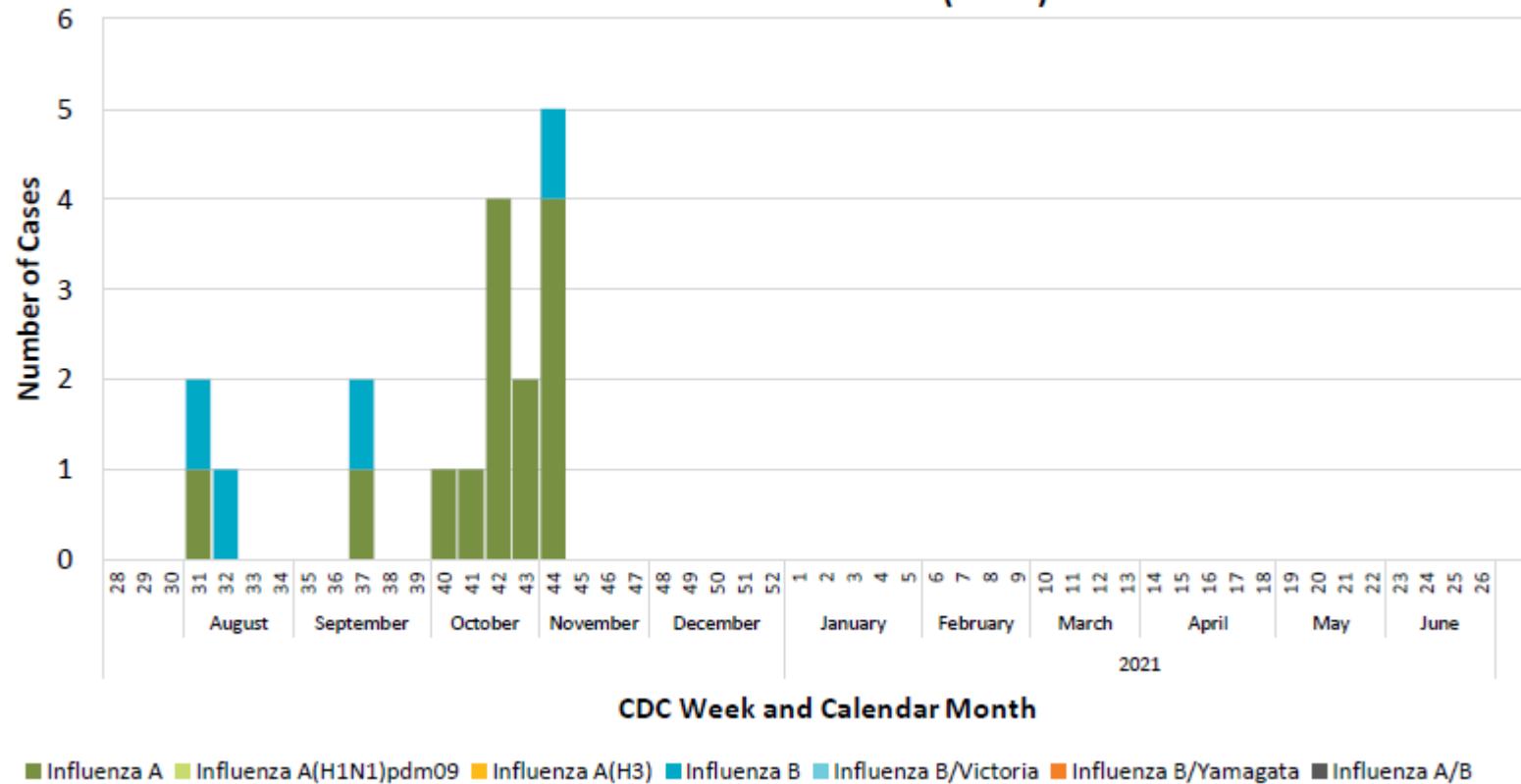
Data Source: Emergency department chief complaint data

Prepared by County of San Diego, Health & Human Services Agency, Public Health Services, Epidemiology and Immunization Services Branch

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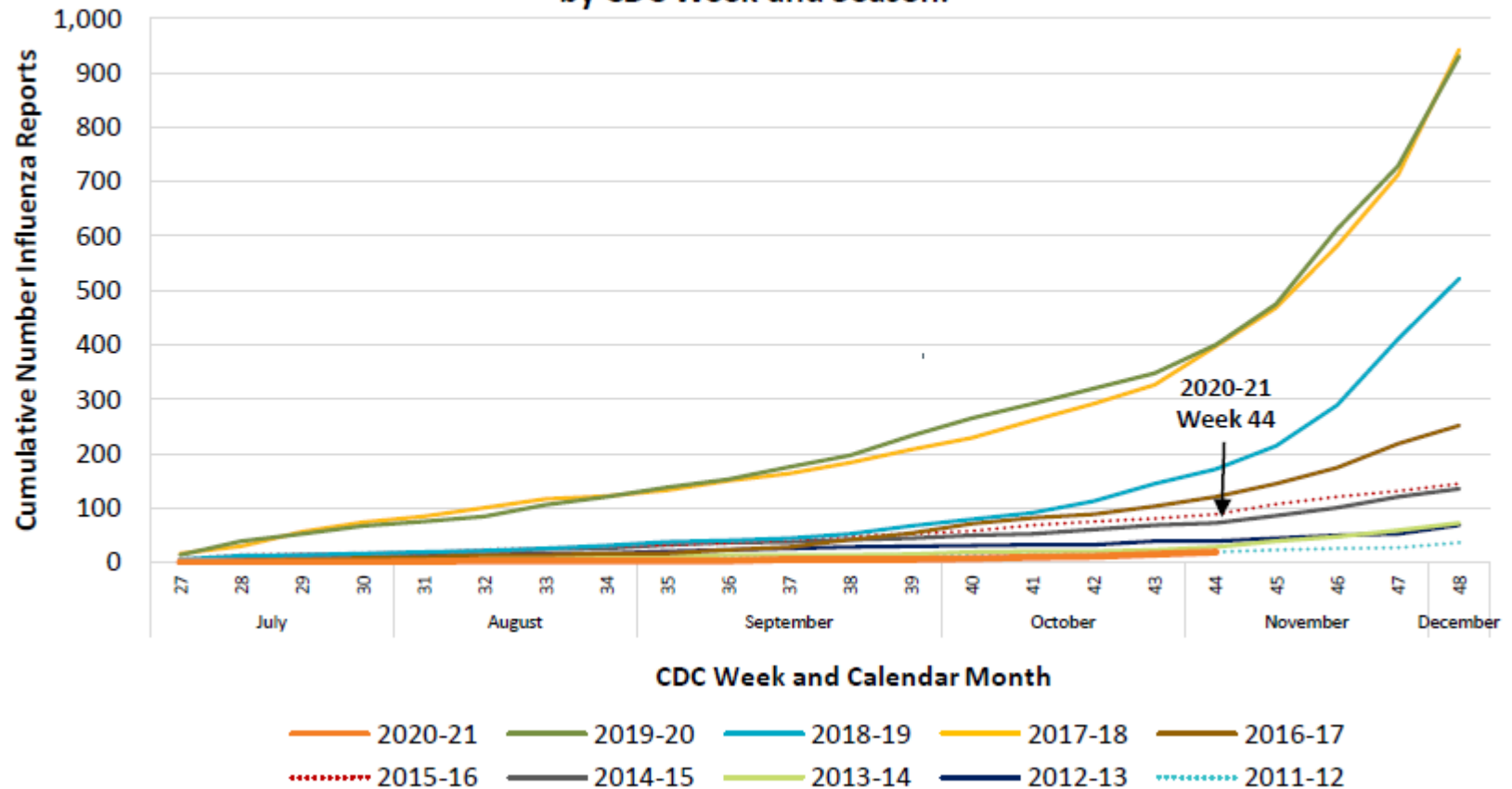
Figure 2. San Diego County Influenza Detections by Type and Week of Report, 2020-21 Season to Date (N=18).



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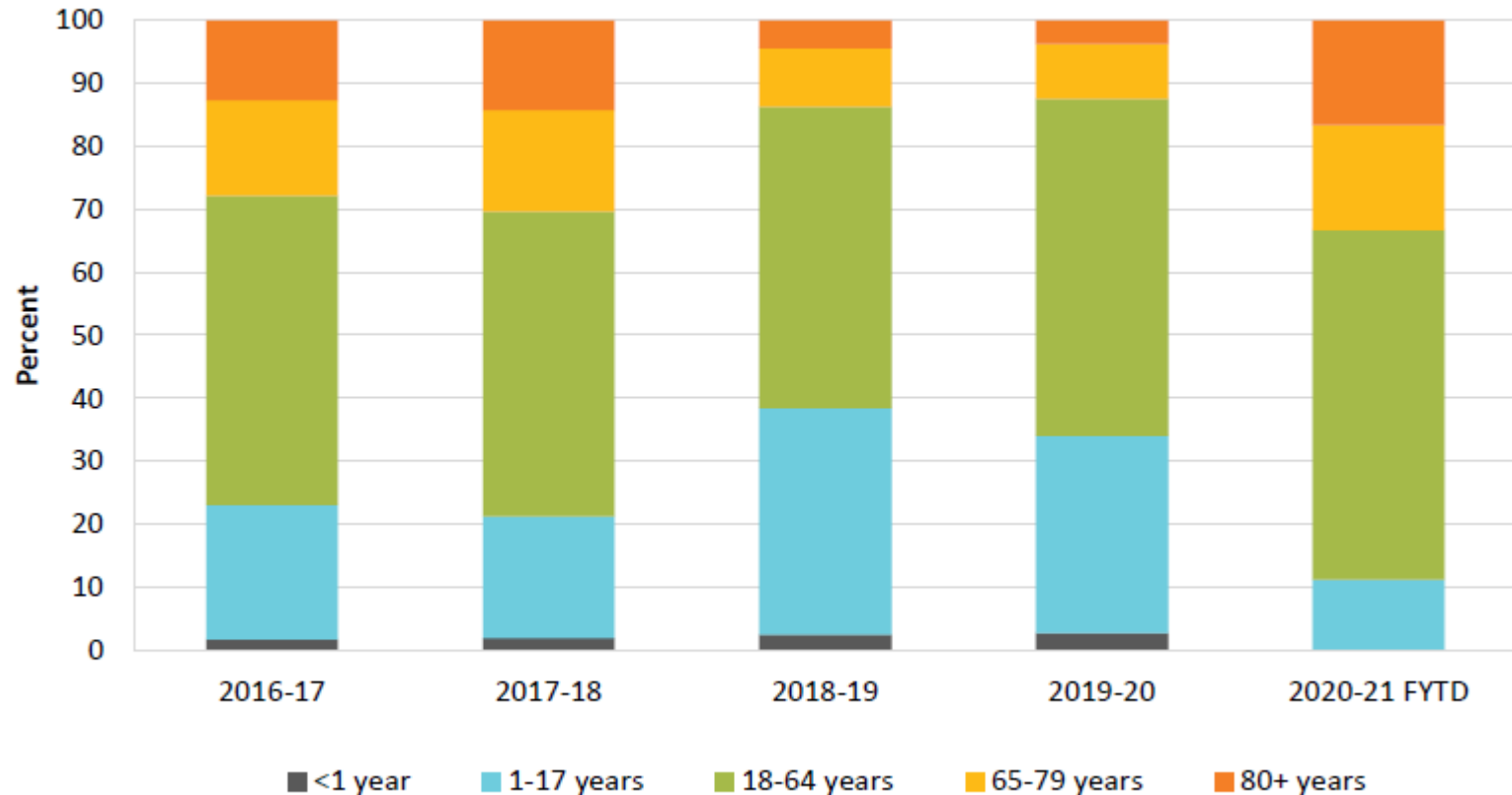
**Figure 3. Cumulative Influenza Cases Reported
by CDC Week and Season.**



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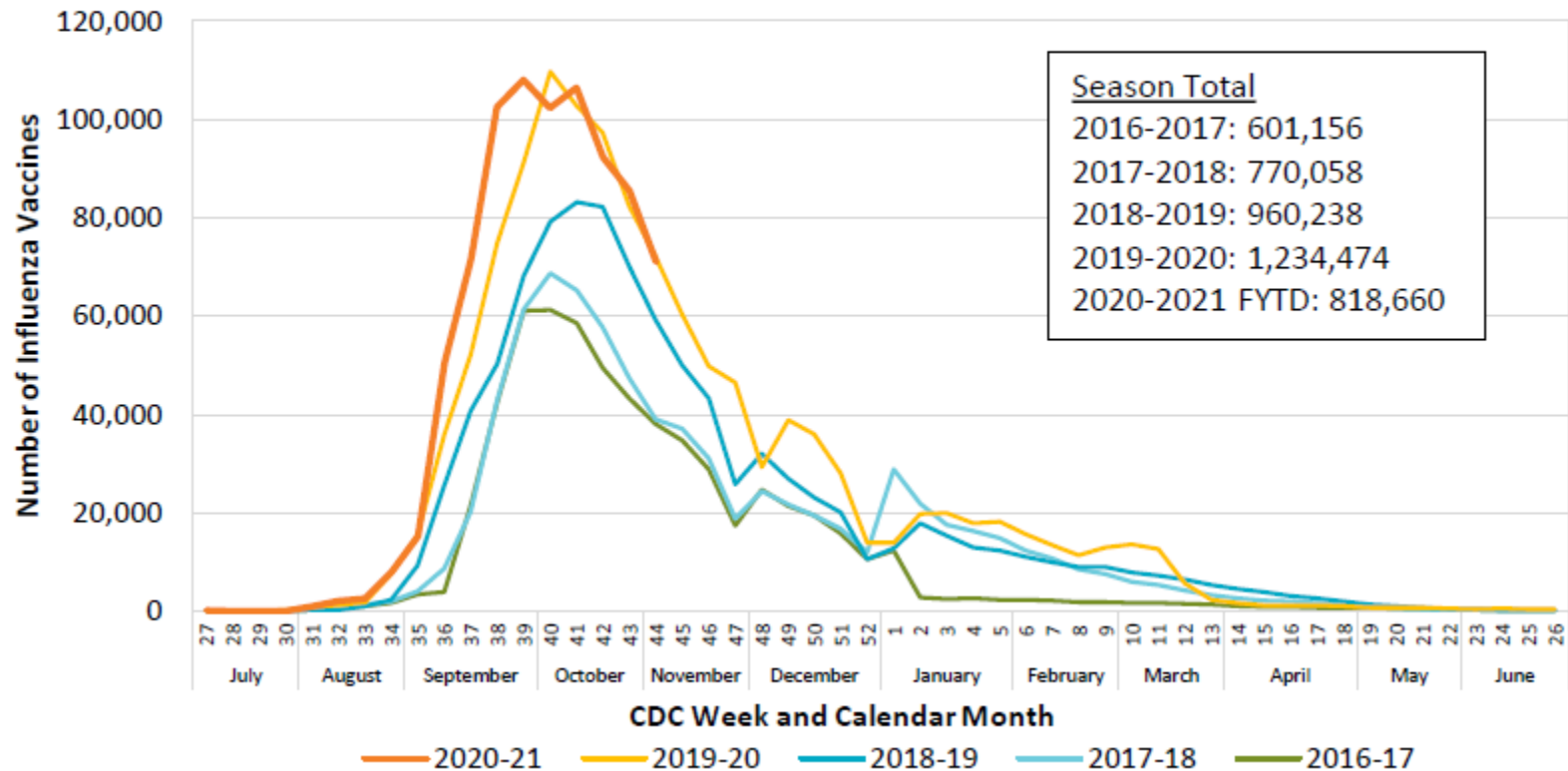
Figure 4. Proportion of Influenza Cases by Age Group and Season.



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Figure 5. Number of Influenza Vaccinations Administered* by CDC Week and Season.

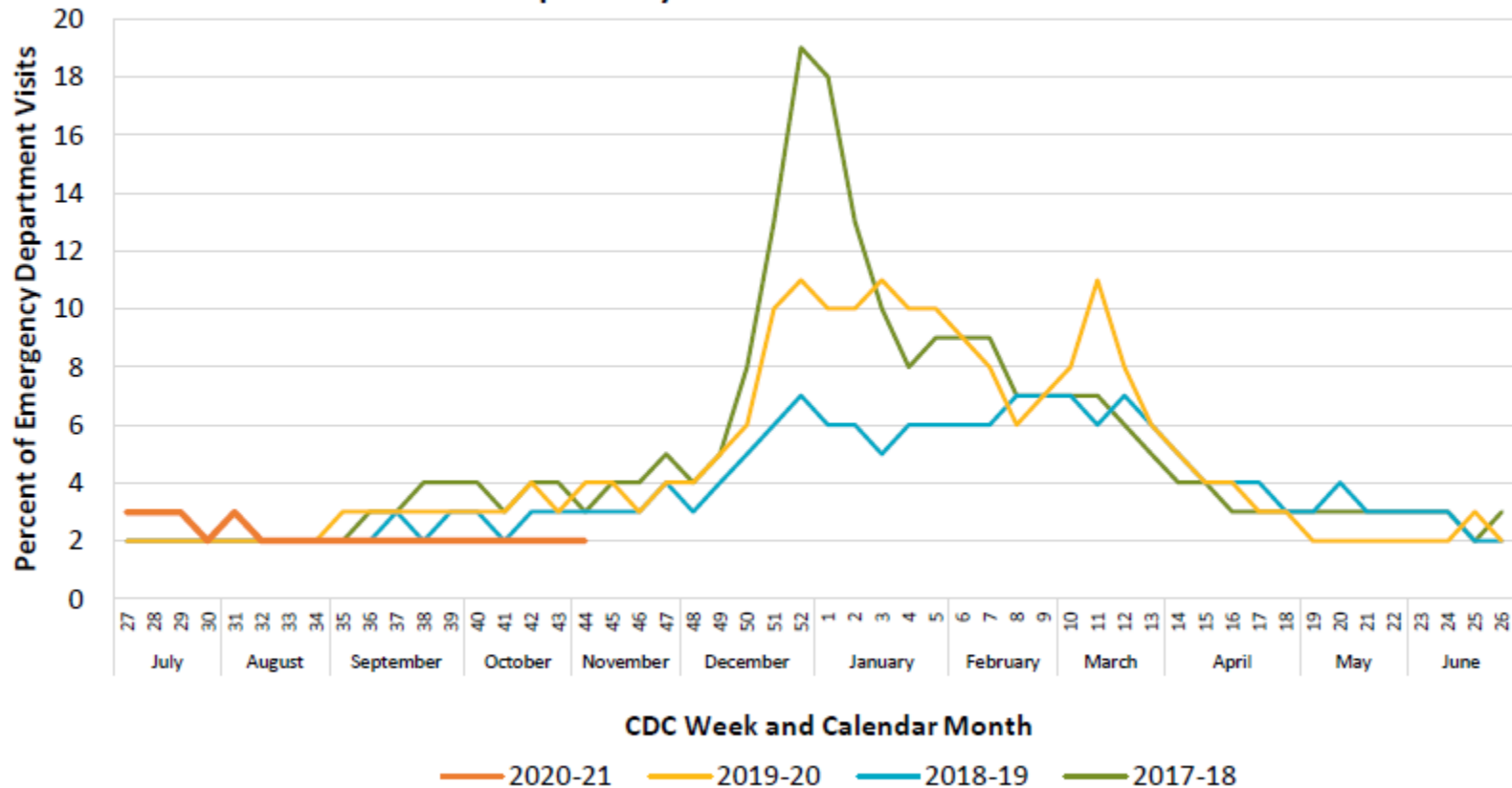


* Influenza vaccinations administered and entered into the San Diego Immunization Registry ([SDIR](#))

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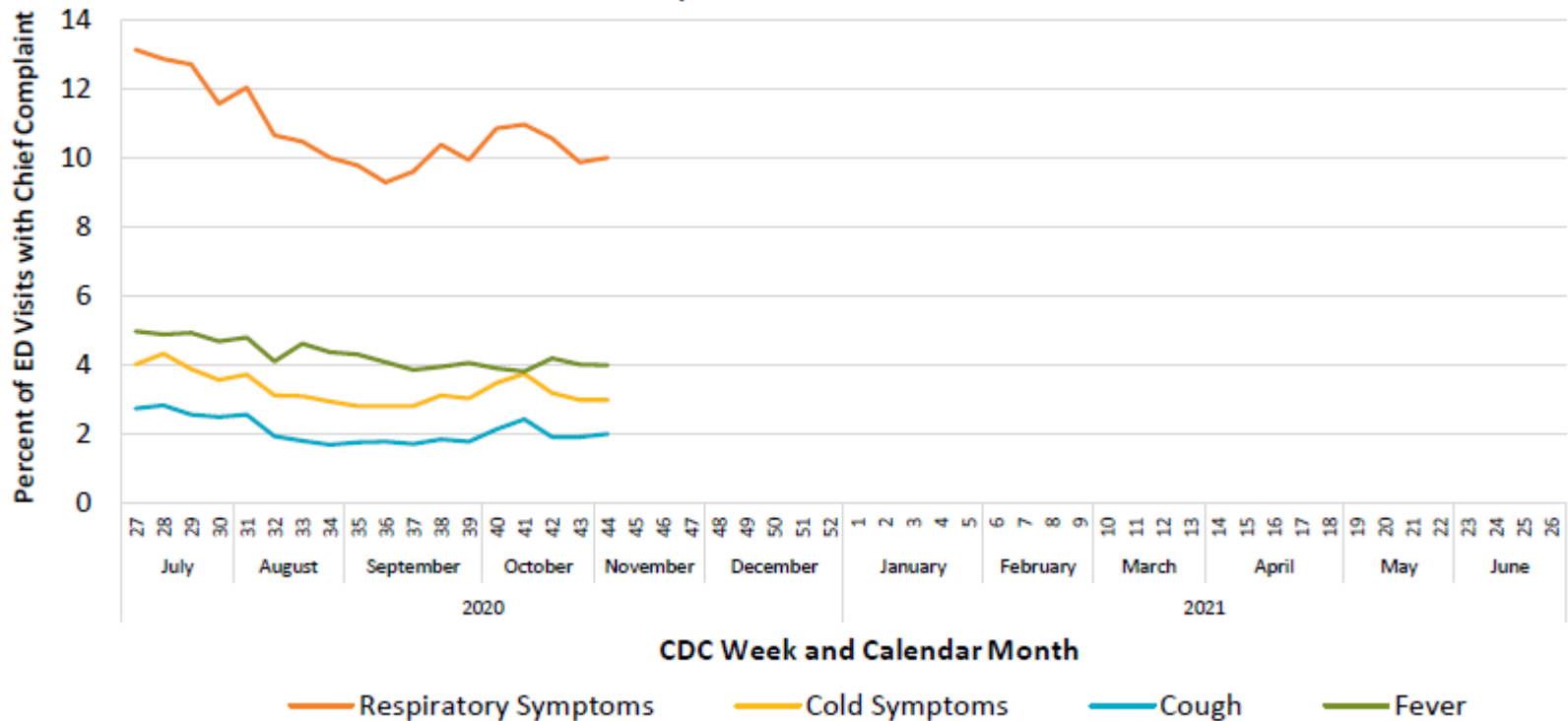
Figure 6. Percent of Emergency Department Visits for ILI Chief Complaint by CDC Week and Season.



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Figure 7. Percent of Emergency Department Visit Chief Complaints for Cough, Cold, Fever, or Respiratory Symptoms* by CDC Week, 2020-21 Season to Date.

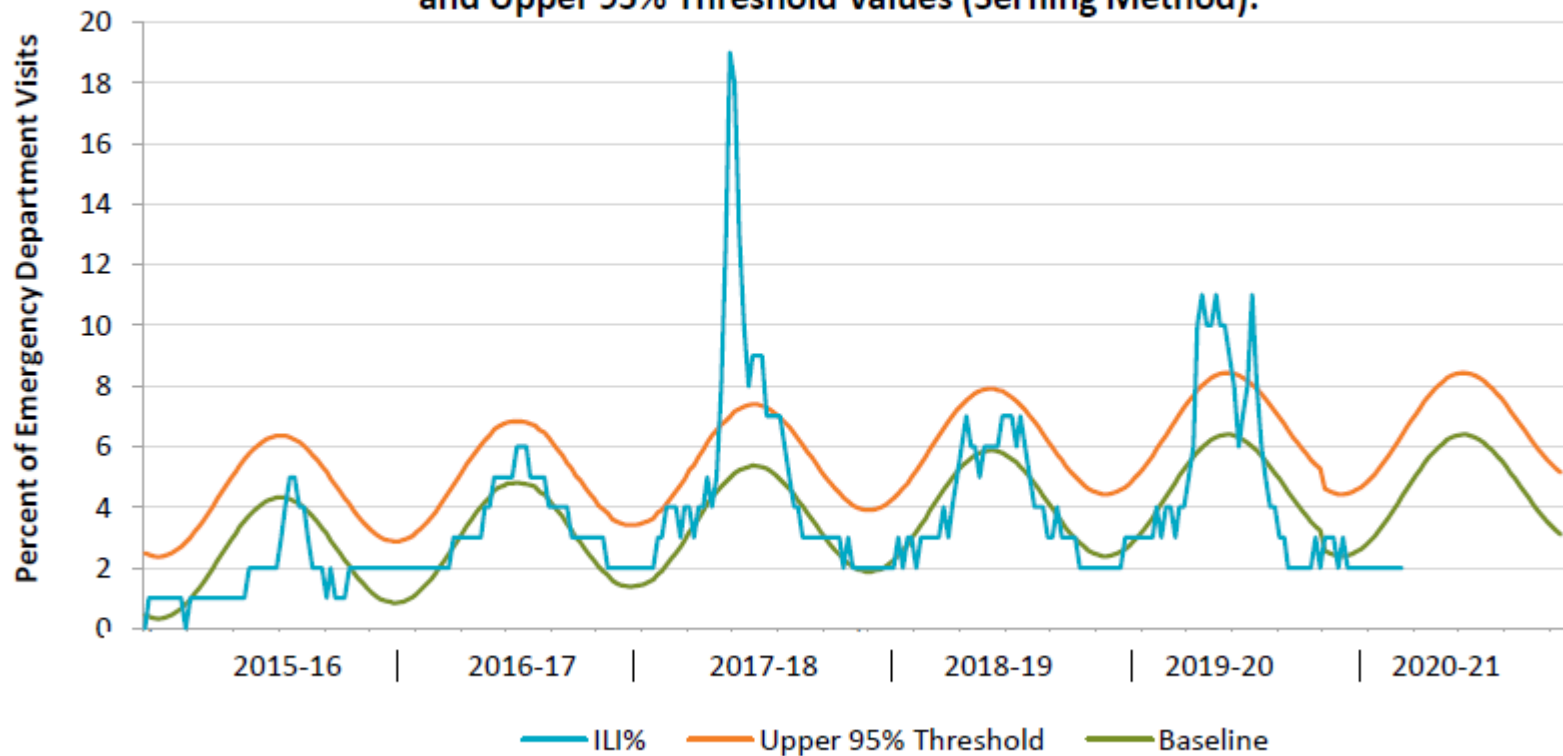


* Respiratory category includes cough, cold symptoms, influenza-like illness, and other respiratory symptoms.

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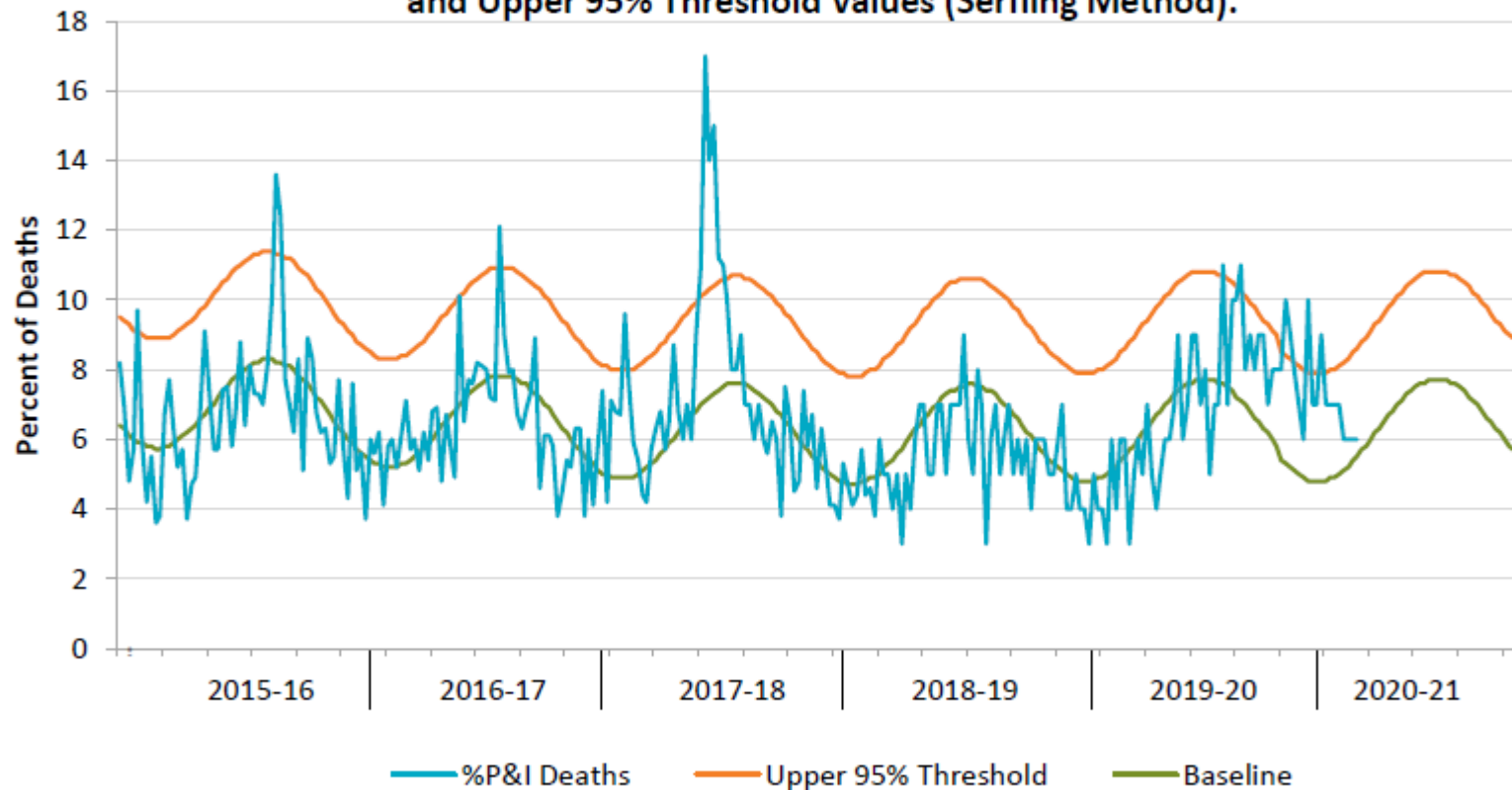
Figure 8. Percent of San Diego County Emergency Department Visits for Influenza-like Illness by CDC Week and Season Compared to 5-Year Baseline and Upper 95% Threshold Values (Serfling Method).



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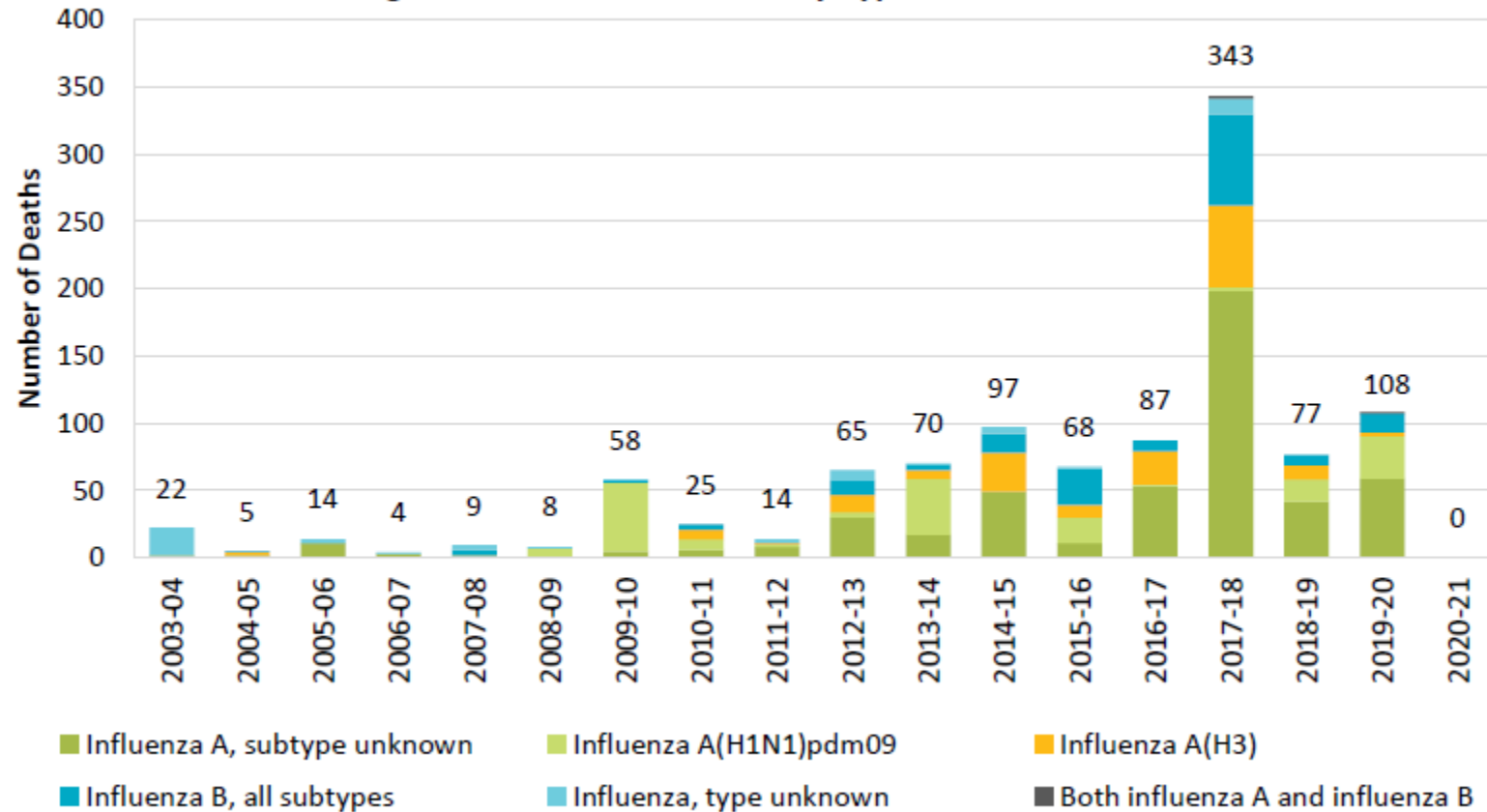
Figure 9. Percent of San Diego County Deaths Registered with Pneumonia and/or Influenza by CDC Week and Season Compared to Prior 5-Year Baseline and Upper 95% Threshold Values (Serfling Method).



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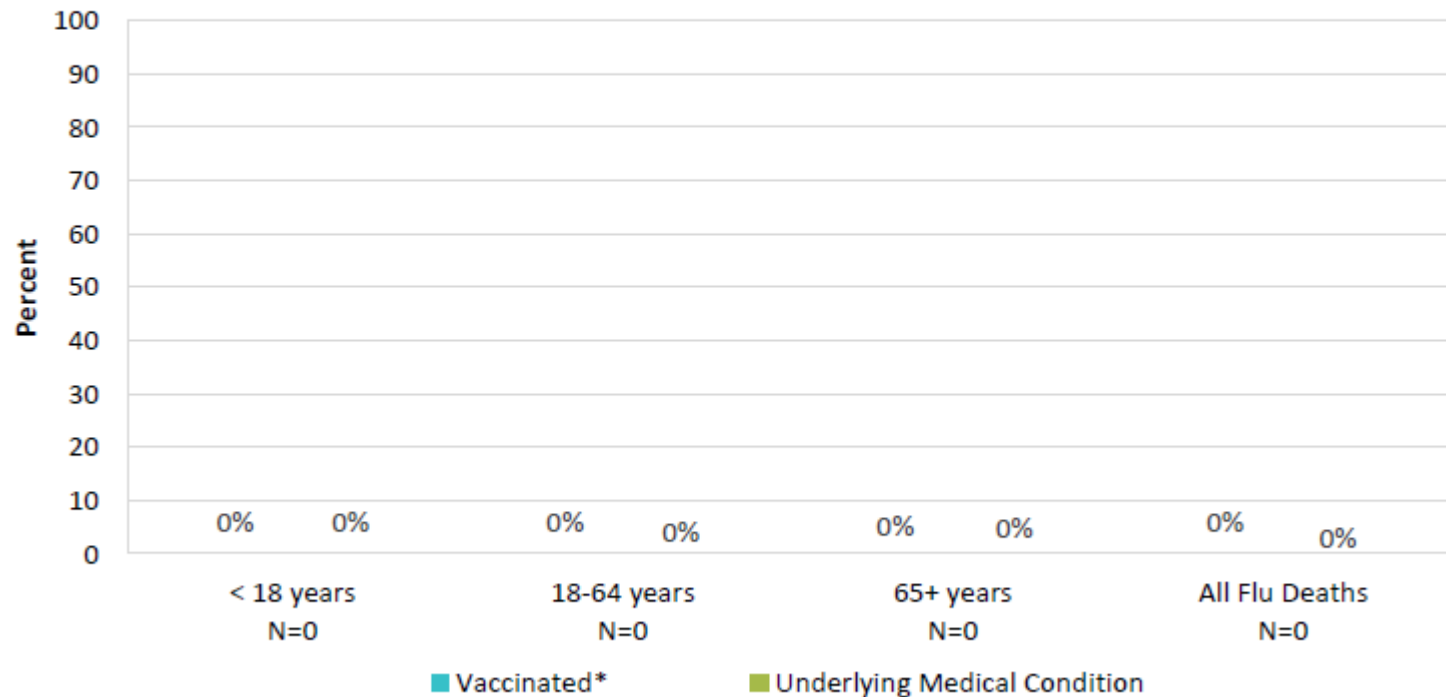
Figure 10. Influenza Deaths by Type and Season.



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Figure 11. Percent of Influenza Deaths by Age Group, Vaccination Status, and Underlying Medical Condition, 2020-21 Season.



* known to be vaccinated



Pregnancy and Influenza Vaccination

Both the Centers for Disease Control and Prevention (CDC) and the American College of Obstetricians and Gynecologists (ACOG) recommend influenza vaccination as an essential element of prenatal and postpartum care. Among pregnant women, influenza can result in more serious illness, including pneumonia, hospitalizations, and admission to intensive care units. Adverse perinatal and neonatal outcomes like pre-term labor, low birth weight, and stillbirth are also more likely with influenza infection in pregnancy.

In a study published last month in the [Morbidity and Mortality Weekly Report](#), CDC researchers determined that during the 2019-20 season, 61.2% of pregnant women in the United States received influenza vaccination. Vaccination coverage was highest (75.2%) among women who reported receiving a provider offer or referral for vaccination. Compared with the 2018–19 season, increases in vaccination coverage were observed during the 2019–20 season for non-Hispanic Black women (14.7 percentage points, to 52.7%), Hispanic women (9.9 percentage points, to 67.2%), and women of other non-Hispanic (other) races (7.9 percentage points, to 69.6%), and did not change for non-Hispanic White women (60.6%). Racial/ethnic disparities in influenza vaccination coverage decreased but persisted, even among women who received a provider offer or referral for vaccination.

Consistent provider offers or referrals, in combination with conversations culturally and linguistically tailored for patients of all races/ethnicities, could increase vaccination coverage among pregnant women in all racial/ethnic groups and reduce disparities in coverage.

Clinical guidance on influenza vaccination in pregnancy is available from [CDC](#) and [ACOG](#). Additionally, CDC has a [website](#) with more information and tools to help providers discuss the benefits of vaccination with pregnant women.